

AUG 14 2006

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NUMBER OF PAGES, INCLUDING COVER: 10

TO:

NAME/COMPANY	FACSIMILE NO.	
Examiner: Roy Dean Gibson U.S. Patent and Trademark Office	(571) 273-8300	<input type="checkbox"/> SUCCESSFULLY FAXED
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FROM: Lawrence A. Hoffman, Esq.

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AUG 14 2006

P/4758-2

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

Anders LUNDERQVIST et al.

Date: August 14, 2006

Serial No.: 10/708,624

Group Art Unit: 3739

Filed: March 16, 2004

Examiner: Roy Dean Gibson

For: CEREBRAL TEMPERATURE CONTROL

Via Facsimile (571) 273-8300

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

AMENDMENT/SUBMISSION

Sir:

In response to the Office Action mailed September 30, 2005, please reconsider the above-identified application amended as follows:

FEE CALCULATION☒ No Additional Fee is Required

Any additional fee required has been calculated as follows:

☒ If checked, "Small Entity" status is claimed.

NO. OF CLAIMS	PER THIS RESPONSE	PREVIOUSLY PAID FOR	ADD'L CLAIMS	RATE	AMOUNT DUE
TOTAL	MINUS	* =		X (\$25 SE or \$50)	\$
INDEP.	MINUS	** =	0	X (\$100 SE or \$200)	\$ 0.(X)
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				X (\$180 SE or \$360)	\$ 0.(X)
* not less than 20 ** not less than 3				TOTAL	\$

_____ If any additional payment is required, a check which includes the calculated fee of \$ _____ (OFGS Check No. _____) is attached.

_____ Please charge the above calculated fee to our Deposit Account No. 15-0700.

In the event the actual fee is greater than the payment submitted or is inadvertently not enclosed or if any additional fee during the prosecution of this application is not paid, the Patent Office is authorized to charge the underpayment to Deposit Account No. 15-0700.

CONTINGENT EXTENSION REQUEST

If this communication is filed after the shortened statutory time period had elapsed and no separate Petition is enclosed, the Commissioner of Patents and Trademarks is petitioned, under 37 C.F.R. §1.136(a), to extend the time for filing a response to the outstanding Office Action by the number of months which will avoid abandonment under 37 C.F.R. §1.135. The fee under 37 C.F.R. § 1.17 should be charged to our Deposit Account No. 15-0700.

AMENDMENTS

☐ If checked, amendment(s) to the specification are submitted herewith.

☐ If checked, an amended abstract is submitted herewith.

☒ If checked, amendment(s) to the claims are submitted herewith.

☐ If checked, amendment(s) to the drawings are submitted herewith.